PTO/SB/21 (04)

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## TRANSMITTAL **FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	09/476,689			
Filing Date	December 30, 1999			
First Named Inventor	Kent C.B. Stalker			
Art Unit	3764			
Examiner Name	Phillip A. Gray			
Attorney Docket Number	ACSES-52008 (1816P)			

ENCLOSURES (Check all that apply)							
Fee Transmitt	tal Form		Drawing	g(s)		After Allowance Communication to TC	
Fee A	ttached	Licensing-related Papers				Appeal Communication to Board of Appeals and Interferences	
Amendment	/ Reply	Petition				Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)	
After	r Final			to Convert to a onal Application		Proprietary Information	
Affid	avits/declaration(s)	Power of Attorney, Revocation Change of Correspondence Address			dress	Status Letter	
Extension of	Time Request		Termina	al Disclaimer		Other Enclosure(s) (please identify below):	
Express Abar	ndonment Request	Request for Refund				Postcard \$500.00 Check	
Information Disclosure Statement		CD, Number of CD(s)  Landscape Table on CD		n			
	Certified Copy of Priority Document(s)			Remarks			
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT							
Firm Name	FULWIDER PATTO	N LLP					
Signature They Hry							
Printed name	Printed name THOMAS H. MAJCHER						
Date	September 4, 2007				Reg. No.	31,119	

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THOMAS H. MAJCHER

Date

September 4, 2007

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Fees pursuant to the Consultated Appropriatons Act, 2005 (H.R. 4818).			Complete if Known			
			Application Number	09/476,689		
<b>FEE TRANSI</b>	VIII	IAL	Filing Date	April 5, 2006		
For FY 20	07		First Named Inventor	Kent C. B. Stalker		
		7.050.4.07	Examiner Name	Phillip A. Gray		
Applicant claims small entity status	s. See 3	37 CFR 1.27	Art Unit	3764		
TOTAL AMOUNT OF PAYMENT	(\$)	\$500.00	Attorney Docket No.	ACSES-52008 (G1816USO1)		
METHOD OF PAYMENT (check a	li that an	nlv)				

METHOD OF PAYMENT (check all that apply)							
Check Credit C	Card	Money Order	None	Other (	please identify):		
Deposit Account De	posit Account Deposit Account Number: 06-2425			Deposit	Deposit Account Name: FULWIDER PATTON L		
For the above-identified of	leposit accou	nt, the Director is	hereby author	rized to: (check all t	hat apply)		
Charge fo	ee(s) indicate	d below		Charge	fee(s) indicated	below, except for	the filing fee
		fee(s) or any und	erpayments o	f 🛛 Credit a	ny overpayment	s	
WARNING: Information on th	der 37 CFR 1 ils form may	become public.	Credit card	information should	d not be includ	ed on this form.	Provide credit card
Information and authorization	n on PTO-20	38.					
FEE CALCULATION							
1. BASIC FILING, SEARC	CH, AND EX FILING I	FEES	SEARCH		EXAMINA	ATION FEES	
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid(\$)
	300	150	500	250	200	100	rees raid(#)
Utility	200	100	100	50	130	65	
Design	200	100	300	150	160	80	
Plant							
Reissue	300	150	500	250	600	300	
Provisional	- 200	100	0	0	0	0	
2. EXCESS CLAIM FEES	i						<b>Small Entity</b>
Fee Description						Fee (\$)	Fee (\$)
Each claim over 20 (include	•	•				50	25
Each independent claim or	ver 3 (inclu	aing Reissues)	t e e e e e e e e e e e e e e e e e e e			200	100
Multiple dependent claims						360 Multiple C	180 Dependent Claims
Total Claims	Extra Clain	ns Fee (\$)		Fee Paid (\$)		Fee (\$)	Fee Paid (\$)
- 20 or HP =			550.00 =	\$0.00			
HP = highest number of total c	laims paid for	, if greater than 2	0.				
<u>Indep. Claims</u> - 3 or HP =	Extra Clain		200.00 =	Fee Paid (\$) \$0.00			
HP = highest number of indepe 3. APPLICATION SIZE FI		paid for, if greate	er than 3.				
If the specification and dra 37 CFR 1.52(e)), the applic See 35 U.S.C. 41(a)(1)(G)	cation size t	ee due is \$250	of paper (ex ) (\$125 for s	cluding electronic mall entity) for ea	cally filed sequach additional	uence or comp 50 sheets or fr	uter listings under raction thereof.
Total Sheets	Extra She			h additional 50 or			
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4. OTHER FEE(S)	@420 fc-	(no small antit	hy diacoust				Fee Paid (\$)
Non-English specification, Other (e.g., late filing surch	का उठा tee narge): Pre	(no small entite -Appeal Brief	iy discount)				\$500.00

SUBMITTED BY	$\sim$					
Signature	hus	H Mm	Registration No. (Attorney/Agent)	31,119	Telephone	310 824 5555
Name (Print/Type)	THOMAS H. MAJCHER			Date	09/04/07	

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